F03-1036

PTO/SB/01 (10-01)
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DECLARATION FOR UTILITY OR

Prior Foreign Application

Number(s)

Attorney D ck t Number

DESIGN	First Named invento	Roger D Schi	untz	
PATENT APPLICATION	COMPLETE IF KNOWN			
(37 CFR 1.63)	Application Number			
Declaration Declaration	Filing Date			
Submitted OR Submitted after Initial with Initial Filing (surcharge	Art Unit			
Filing (37 ČFR 1.16 (e)) required)	Examiner Name			
As the below named inventor, I hereby declare that:				
My residence, mailing address, and citizenship are as stated below				
I believe I am the original and first inventor of the subject matter whi	ch is claimed and for whic	h a patent is sought on th	ne invention entitled:	
Air Ride Suspension				
			!	
(Title of the Inve	ention)			
the specification of which				
is attached hereto				
OR	\neg			
was filed on (MM/DD/YYYY)	as United States Ap	plication Number or PCT	International	
Analization Number				
Application Number and was amended	on (MM/DD/YYYY)		(if applicable).	
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.				
I acknowledge the duty to disclose information which is material to pa applications, material information which became available between th international filing date of the continuation-in-part application.	ie ming date of the prior a	oplication and the nationa	al or PCT	
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or breeder's rights certificate(s), or 365(a) of any PCT international ap States of America, listed below and have also identified below, by c breeder's rights certificate(s), or any PCT international application is claimed.	phodulon while designate	u at least one country o	ther than the United	

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto: [Page 1 of 2]

Country

Foreign Fillng Date

(MM/DD/YYYY)

Priority

Not Claimed

Certified Copy Attached?

NO

YES

PTO/SB/01. (10-01)

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DECLARATION — Utility or Design Patent Application

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Frank D. Lachenmaier			
Name			
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Kokomo		IN	46903-1047
City		State	ZIP
US Country Te	765-45 lephone	56-3827	765-456-3839 Fax
I hereby declare that all statements made herein of my are believed to be true; and further that these statemer made are punishable by fine or imprisonment, or both, validity of the application or any patent issued thereon.	own knowledge are nts were made with under 18 U.S.C. 100	true and that all statements me the knowledge that willful fals 01 and that such willful false st	ade on information and belief e statements and the like so atements may jeopardize the
NAME OF SOLE OR FIRST INVENTOR :	A petition ha	as been filed for this unsig	ned inventor
Given Name Roger D. (first and middle [if any])		Family Name or Surname	,
Inventor's Hoger & Julifurny			Date 1/20/04
Lowell	IN	US	US
Residence: City 1681 Driftwood Drive	State	Country	Citizenship
Mailing Address			
Lowell	[NI	40050	T
City	IN State	46356	US
NAME OF SECOND INVENTOR:		been filed for this unsigne	Country
Given Name (first and middle [if any])	F	Family Name or Surname	
Inventor's Signature			Date
	12.0		Duto
Residence: City	State	Country	Citizenship
Mailing Address			
City	State	ZIP	Country
Additional inventors are being named on thesup	plemental Additiona	Il Inventor(s) sheet(s) PTO/SB/0	

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PTO/SB/81 (02-01)

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Appli ation Number	
Filing Dat	
First Named Inventor	Roger D. Schluntz
Title	Air Ride Suspension
Group Art Unit	·
Examiner Name	
Attorney Docket Number	F03-1036

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X Applican	t/Invento	or.					
Assigned Statemen	e of reco	rd of the entire interest 37 CFR 3.73(b) is end	t. See 37 CFR 3 closed. (Form P	.71. TO/SB/90	6).		<i>i</i>
		SIGNATURE of App	plicant or Assign	ee of Re	cord	_	
Nam		Roger D. Schluntz	,		\		
Signature	4	vaer IT Jelle	inh			Ý	
Date		1/20/04	0				
NOTE: Signatures of all forms if more than on s	the invent signature is	ors or assignees of record of required, see below*.	of the entire interest	or their rep	presentativ	(s) are required. Submit	multiple
☑ *Total of1		ns are submitted.	,				

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